DEPARTMENT OF SOCIAL AND HEALTH SERVICES MEDICAL ASSISTANCE ADMINISTRATION Olympia, Washington

To: Health Departments Memorandum No: 03-64 MAA

Managed Care Plans Issued: September 18, 2003

Regional Administrators

CSO Administrators For Information Call:

1-800-562-6188

From: Douglas Porter, Assistant Secretary

Medical Assistance Administration (MAA)

Subject: Billing Clarifications for Tuberculosis Treatment Services

Retroactive to dates of service on and after July 1, 2003, the Medical Assistance Administration (MAA) will allow additional CPTTM procedure codes to replace the discontinued state-unique procedure code used for tuberculosis (TB) treatment services for professional service providers. This memorandum further explains billing procedures for non-professional service providers.

Home Visits for TB Treatment Services and Provider-Type Clarification

MAA discontinued state-unique codes 9011M and 9012M for TB treatment services in Numbered Memorandum 03-34 MAA. Providers were instructed to use Evaluation & Management (E&M) codes 99201-99215 to bill for these services.

However, through the use of state-unique procedure codes 9011M and 9012M, MAA reimbursed Health Departments for providing TB treatment services to clients in their homes, and allowed for services provided by non-professional providers such as Community Health Workers who are employed by the Health Departments.

The E&M codes 99201-99215 are for office visits only, and must be billed for professional providers such as physicians (or nursing staff under a physician's supervision), Advanced Registered Nurse Practitioners (ARNPs), and Physician Assistants (PAs).

When billing for TB treatment services provided by professional providers in the client's **home**, Health Departments may also bill **CPT codes 99341 and 99347**.

Procedure		7/1/03 Maximum
Code	Brief Description	Allowable Fee
99341	Home visit, new patient	\$36.17
99347	Home visit, est patient	\$28.66

For dates of service on and after July 1, 2003 through September 30, 2003 ONLY, MAA will reinstate state-unique procedure codes 9011M and 9012M for Health Departments billing for TB treatment services provided by non-professional providers.

<u>For dates of service on and after October 1, 2003</u>, Health Departments billing for TB treatment services provided by **non-professional providers in either the client's home or in the office** must bill using **HCPCS code T1020**.

When billing for an initial visit, do not use a modifier. When billing for follow-up visits, use modifier TS (follow-up service).

Procedure			10/1/03 Maximum
Code	Mod	Brief Description	Allowable Fee
T1020		Personal care services, per diem	\$35.87
T1020	TS	Personal care services, per diem with	\$21.37
		follow-up services modifier	

Note: Continue to bill using the appropriate TB-related diagnosis codes.

To obtain this memorandum electronically, go to MAA's website at http://maa.dshs.wa.gov (click on the Provider Publications/Fee Schedules link).

Bill MAA your usual and customary charge.